## PART B - FEE(S) TRANSMITTAL

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Loctite Corpora One Henkel Way Rocky Hill, CT (		I her State addr trans	Cer beby certify that the ses Postal Service we sessed to the Mail amitted to the USP	tificate is Fee(s vith suf Stop FO (57	of Mailing or Transn s) Transmittal is being ficient postage for first ISSUE FEE address 1) 273-2885, on the dat	hission deposited with the United class mail in an envelope above, or being facsimile e indicated below.			
		(Depositor's name)							
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APPLICATION NO.	FILING DATE		40,000 340 3 40 3 40 40	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.			CONFIRMATION NO.
10/599,870	10/599,870 10/12/2006			Alan Eward Litke	LC-509/PCT/US 5885				
TITLE OF INVENTION: UV CURABLE COATING COMPOSITIONS									
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY ISSUE FEE DU		PUBLICATION FEE D		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	NO \$1740		\$300		\$0 \$2040		04/25/2012	
EXAMINER A			ART UNIT	CLASS-SUBCLASS					
PEPITONE, MICHAEL F 1767			1767	522-046000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Steven C. Bauman					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Henkel Corporation Rocky Hill, Connecticut									
Please check the appropriate assignee category or categories (will not be printed on the patent):									
				B. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number   1 - 1 2 5 0 (enclose an extra copy of this form).					
A A	s SMALL ENTITY state	ıs. See	37 CFR 1.27.	☐ b. Applicant is no	long	ger claiming SMAl	LL EN'	IITY status. See 37 CF	R 1.27(g)(2).
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Authorized Signature	Haw	U				Date	78	ril 25	, 2012
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